U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. PATENT APPLICATION FEE DETERMINATION RECORD Application or Docket Number 103-008-CIP Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I SMALL ENTITY OR SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE FEE RATE FEE BASIC FEE **\$.385** (37 CFR 1.16(a)) OR TOTAL CLAIMS 100 x s 9 80 720 (37 CFR 1.16(c)) minus 20 = OR INDEPENDENT CLAIMS 5 (37 CFR 1.16(b)) 8 minus 🖀 x s 43 =215 X S OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) OR 1320 * If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** OR TOTAL CLAIMS AS AMENDED - PART II OTHER THAN OR (Column 1) (Column 2) (Column 3) SMALL ENTITY SMALL ENTITY CLAIMS **HIGHEST** PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-**EXTRA** 눋 AFTER **PREVIOUSLY** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE 竝 Total (37 CFR 1.16(c)) Minus ENDM X \$ OR X \$ Minus *** = = X \$ OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR + \$ TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ω PRESENT REMAINING NUMBER RATE ADDI-RATE ADDI-ENT AFTER PREVIOUSLY **EXTRA** TIONAL TIONAL AMENDMENT **PAID FOR** FEE FEE Total (37 CFR 1,16(c)) Minus **AMENDM** X \$_ OR X \$ Minus X \$ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST O PRESENT REMAINING RATE NUMBER ADDI-RATE ADDI-**EXTRA** ENDMENT PREVIOUSLY **AFTER** TIONAL TIONAL AMENDMENT PAID FOR FEE FEE Total Minus (37 CFR 1.16(c)) X \$ X \$ OR Independent (37 CFR 1.16(b)) Minus X S OR X \$ FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) OR TOTAL TOTAL ADD'L FEE OR ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

^{***} If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or $\widehat{\mathbf{D}}$ ocket Number

10898397

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			ooi					RATE	FEE	7	RATE	FEE
FC	PR	NUMBER	IBER FILED		NUMBER EXTRA		BASIC FEE	385.00	OR	BASIC FEE	770.00	
TC	TAL CHARGE	ABLE CLAIMS	<i>100</i> minus 20=		*80			X\$ 9=	-	OR	X\$18=	720
<u> </u>	EPENDENT C		minus 3 =		, ¿			X43=		OR	X86=	215
MULTIPLE DEPENDENT CLAIM PRESENT								+145=		OR	+290=	
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2	<i>'</i>	TOTAL		OR	TOTAL	1320
CLAIMS AS AMENDED - PART II										4	OTHER	
,		(Column 1)	.	(Colun		(Column 3)	, .	SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIC PAID I	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus			=		X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL					<u> </u>	1	+145=		OR	+290=	
								TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3)						ADDIT. FEE			ADDIT. FEE		
		CLAIMS		HIGH	EST		7 г		ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVIC PAID I	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=] [X43=		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									011		
								÷145=		OR	+290=	
				A	TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE				
:		(Column 1)										
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER JUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**		=	\prod	X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X43=		OR	X86=	
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									Un		-
* J	f the entry in colu		+145=		OR	+290=						
**	f the "Highest Nur	mber Previously Pa mber Previously Pa	id For" IN THIS	SPACE is	less than	1 20, enter "20.	A	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
		ber Previously Paid					er fou	nd in the app	ropriate box	in col	umn 1.	